Ç.x	City of Portland	He	eal	ltŀ	n I	nspectic	n F	Renort	Page 1 of 2	
Establishment Namo							Date 3-31-09			
Hollywood Video # 019100		No. of Risk Factor/Intervention Violations No. of Repeat Risk Factor/Intervention Violations							Time In 2:14	
								re (optional)	Time Out 📆 🥞	T'd
License/Est. ID# Address					City/State			Zip Code	Telephone	
License Posted Owner Name		t		8	Postland, Me.			04103	878-8391	
				Pı	Purpose of Inspection			Est. Type	Risk Category	***************************************
[] Yes [>] No								'		
IN= in compliance O	FOODBORNE ILLNESS RISK FA ted compliance status (IN, OUT, N/O, N/A) f UT=not in compliance N/O=not observed	or ea	ich n	umt	oere	d item		Mark "X" in appropr	Siriate box for COS arepection R=repeat v	id/or R
Compliance Status Supervision			3		Con	npliance Status				COSR
5 IN OUT P	PIC present, demonstrates knowledge, and				16	I IN OUTN/A N/O	ne/Temperature mperatures	ture		
p	erforms duties Employee Health				17	IN OUTN/A N/O	Prope	er reheating procedu	res for hot holding	
5 2 IN OUT N	Management awareness; policy present				18 19	IN OUT N/A N/O IN OUTN/A N/O		er cooling time & ten er hot holding tempe	nperature	
	roper use of reporting, restriction & Exclusion			5	20	IN OUT N/A	Prope	er cold holding temp	eratures	
5 4 IN OUT N/O P	Good Hygienic Practices roper eating, tasting, drinking, or tobacco use	-			21 22	IN OUTN/A N/O IN OUTN/A N/O		er date marking & di as a public health c	sposition	
5 IN OUT N/O N	lo discharge from eyes, nose, and mouth			L			& rec	ord		
5 6 IN OUT N/O H	nting Contamination by Hands ands clean & properly washed	50000		5	23	IN OUT N/A	Cons	onsumer Advisor umer advisory provid	y lad for row or	
2 7 IN OUTN/A N/O N	o bare hand contact with RTE foods or						unde	rcooked foods		
aı 58 IN OUT A	pproved alternate method properly followed dequate handwashing facilities supplied &			5	241			Susceptible Popu		
	ccessible			١	-4	114 OO1 14/A	offere	eurized foods used; ed	prohibited toods not	
5 9 IN OUT F6	Approved Source ood obtained form approved source			-	loe i	IN OUT		Chemical		
10 IN OUT N/A N/O Fo	ood received at proper temperature				25 26	IN OUT N/A	Food	additives: approved substances properly	& properly used	
5 11 IN OUT Fo	ood in good condition, safe, & unadulterated						& use	ed		
	equired records available: shellstock			5	27	Confo IN OUT N/A	rmanc	e with Approved	Procedures	
Prot	tection from Contamination						proce	ss, & HACCP plan	, specialized	
	ood separated & protected ood-contact surfaces: cleaned & sanitized		_		Risl	c factors are imp	roper i	practices or procedu	ures identified as the	moet
5 15 IN OUT Pr	roper disposition of returned, previously		1		pre√	alent contributing/	factors	s of foodborne illnes	s or injury. Public He	alth Í
<u> </u>	served, reconditioned, & unsafe food Interventions are control measures to prevent foodborne illness or injury.								injury.	
GOOD RETAIL PRACTICES Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in pay if numbered item is not in compliance. Mark "X" in pay if numbered item is not in compliance. Mark "X" in pay if numbered item is not in compliance.										
Mark "X" in box if numbe	red item is not in compliance Mark "X" in appr	ropria	te bo	x fo	r CC	OS and/or R COS	=correc	and physical objects sted on-site during ins	s into foods. spection R =repeat vic	olation
	Safe Food and Water	cos	R					oper Use of Utens		COSR
	used where required				41	In-use utensils	: prope	rly stored		
	approved source for specialized processing				42 43	Utensils, equip	ment &	linens: properly stor	red, dried & handled	
Food Temperature Control					44	Gloves used p	roperly	ervice articles: proper	rly stored & used	
31 Proper cooling me	ethods used; adequate equipment for				45	Ú	tensil,	Equipment and V	ending/	
Plant food properly cooked for hot holding			-	2	45	designed, cons	od con structed	tact surfaces cleanal d. & used	ble, properly	
33 Approved thawing methods used 34 Thermometers provided & accurate					46	Warewashing f	acilities	: installed, maintaine	ed, & used; test strips	
Food Identification		35333		1	47	Non-food conta		aces clean Physical Facilities		
Food properly labeled; original container				L	48	Hot & cold wat	ler avai	ilable; adequate pres	ssure	
Prevention of Food Contamination 36 Insects, rodents, & animals not present					49 50	Plumbing insta	lled; pro	oper backflow device er properly disposed	es	
237 Contamination prevented during food preparation, storage & display				2	51	Toilet facilities:	proper	ly constructed, supp	lied, & cleaned	
38 Personal cleanliness 39 Wiping cloths: properly used & stored					52 53	Garbage & refu	use pro	perly disposed; facili	ities maintained	
40 Washing fruits & v			-		54	Adequate venti	ilation (alled, maintained, & o & lighting; designate	clean d areas used	
Person in Charge (Signati	ure) x L. A							-31-09		
Health Inspector (Signatu	re) who were			Foll	low-	up: YES NO	(circle	e one) Follow-up) Date:	
								i ollow-up		

CBL* 375-A023 COOL

CITY O	T Portland	d Health I	nspection	Report	Page <u></u> ৈ	_ of <u>_</u>	
Hollywood Video		As Authorized by	/ 22 MRSA § 2496		Date		
		1 1			3-31-00	f	
icense/EST. ID # Addre	Eulrurn L	City/s	tate Lland Me.	Zip Code	Telephone	6201	
	TEM	ERATURE OB	SERVATIONS	<u> </u>	0.10	0211	
Remizedation I	'emp	Item/Location	Temp	Item/Lo	cation	Temp	
rati (amita a Madana da Amada III. a da dana a anima manak	sandjiras kandi Kanasaka na ina kan	n Nagang Salah Asia Sala Sala Sa	omene e f _{ort} ane e e e e e e e e e e e e e e e e e e	kasinis autoperus protesti muse	TO TOTAL TO CONTROL TO THE CONTROL CON		
Item Violations cited in this report mo	ust be corrected wit	IONS AND COI thin the time frames	RRECTIVE ACTION Delow, or as stated in	NS sections 8-405 11	and 9 406 44 -44	F 10	
Number			a do stated in	300110113 0-400.11	and 6-406,11 of the	e Food Co	
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son in Charge (Signature) ソル	M			D	ate 3-31-0	09	
alth Inspector (Signature) 🔍 🕠	English of the				ate 3-3(-0		